### COUNTY OF LOS ANGELES – TREASURER AND TAX COLLECTOR BUSINESS LICENSE INVESTIGATION REPORT

#### Account# 143280

Application for BOWLING ALLEY						Date 05/09/16
				<del></del>	Hearing I	
D.B.A.	Organia	zation or	Corpor	ation		Incorporation Date
Santa Clarita Lanes		creation				11/25/15
Address of Proposed Activity	Contact					Date Contacted
21615 Soledad Cyn Rd, Saugus 91350		Goodma				05/09/16
Applicant, Sponsoring Adult or Corporate Offic	er		osition			Ever Arrested
1. Charles V. Kinstler II			EO			Yes No No
Address	Hot	_Wgt.	Hair	Eyes	DOB	Place of Birth
			osition	··		Ever Arrested
2.		10	OSITION			Yes No
Address	Hgt.	Wgt.	Hair	Eyes	DOB	Place of Birth
11001000		· · · g			_	
		P	osition		-	Ever Arrested
3.						Yes 🗌 No 🔲
Address	Hgt.	Wgt.	Hair	Eyes	DOB	Place of Birth
		Pe	osition			Ever Arrested
4.	TT .	777 /	TT .		DOD	Yes No
Address	Hgt.	Wgt.	Hair	Eyes	DOB	Place of Birth
		P	osition		·	Ever Arrested
5.	.*					Yes 🔲 No 🔲
Address	Hgt.	Wgt.	Hair	Eyes	DOB	Place of Birth
Location						
☐ Owned ☐ Leased ☐ Sub-Leased From W	hom: King	gpin Pro	perties	LLC		
	ate Vicinity		Sc	hool or Churc	hes	Hearing Notice Posted
	ss/Residen	tial	No	one		
Charitable Activity Proposed Date of Activity			Admiss	sion Charged	Amount	Security Guards
Yes During the year	4 - 97		-		<u>-</u>	Yes No No. 1
Estimated Attendance Posted Capacity	Parking			Number	Paved	Lighting
200 521 Outside Signs	south &	east of	brag	160	yes	adequate
Front of building depicting DBA						Interior Lightning adequate
Alcoholic Beverages	Type AB	C Licen	se		ABC Licensed	
Yes No	47-56834				300 Recreation	
Location Previous Licensed	Applican	t Previou	usly Lice	ensed	License Su	spended, Revoked, or Denied
Yes No Date current	Yes 🔲 1	No 🛛 I	Date		Yes 🔲 N	o 🛛 Date
Туре	Туре				Туре	
Public Eating, Bowling Alley, Game Arcade					-	
Date Started Operation Billiard Tables	ha <del>r</del>					rd Number
01/01/16 Yes No Num  Attire Type of Food Served					SR SO 10	
Attire Type of Food Served work shirt w/logo American/Italian	ı				Entertainn	nent (Describe)
Hours of Operation Days of Operation					County I i	cense Number
Mon - Sat 9 am to 12 am 7					County Li	OOTBO I (BIHIDOI
Sun 8 am to 12 am					14	3280
		-			****	<del></del>

Description	n of Veheiles	Model	Vehicle License Number	County License Number	
Year	Make				
			-		
Color Sche	me and Insignia	on vehicles			
	_				
Schedule o	f Rates				
Additional	Information				
				·	
			•		

Reviewed By

Date

R. Bowman Investigated By 5/9/16 Date



### Los Angeles County Treasurer and Tax Collector

### **Application for Business License**

Please note: Business License fees are NOT refundable



Fee: \$2397.00

ID# 143280

ви	SINESS INFORMATION
Type of Business:	Address of Business:
Start Date (Projected):	Rusiness Telephone:
1-1-2016	Business Telephone: 661-554-0540
DBA (Business Name):	Mailing Address:
Santa Clarita Lanes	21615 Soledad Cyn Rd. Saugus 91351
Sellers Permit # (State Board of Equalization):	Partnership LLC _X_ Corporation
Business Ownership Structure: Single ( if LLC or Corporation, the information below is requ	Owner Partnership LLC Corporation ired:
	Incorporated in the State of: CA
Exact Corporate Name: 360 REREATION	
Names of Officers	Addresses Titles
CHARLES V KINSTLERME	CO-OWNIER
LYNDA KINSTLER	20-80 N DE
<del></del>	
АРІ	PLICANT INFORMATION
Applicant's Full Name:  LHARLES V KIL	ISTUER. TE
Home Address	
Home Telephone: Cell Phone:	Email address:
	CVKLJK@ROLCOM
Social Security #: Date of Birth	
Driver's License or State ID#:	Expiration Date:
Male Female Height	Velght Hair Color
license applied for, I agree to submit any additiona license in accordance with regulations established used in connection therewith in conformance with	ct to the best of my knowledge and belief. As a condition of the issuance of the information that may be required, to conduct all phases of this business for such business and to maintain all trucks and/or equipment that may be all applicable laws, ordinances, and regulations.  S Signature:
Application taken by: <u>U6</u>	Date: <u>4-13-14</u>

<sup>\*</sup> If you suspect fraud or wrong doing by a County of Los Angeles employee, report to fraud hotline





225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90012

### BUSINESS LICENSE APPLICATION REFERRAL SUMMARY SHEET

KIND OF BUSINESS: BOWLING ALLEY/SC

ADDRESS OF BUSINESS: 21615 SOLEDAD CYN RD, SAUGUS, CA 91350

TELEPHONE: (661) 254-0540

OWNER OF BUSINESS: LYNDAJKINSTLER

CAL. DR. LIC.#

NAME OF PERSON FINGERPRINTED: CHARLES V KINSTLER II

FICTITIOUS NAME: SANTA CLARITA LANES

MAILING ADDRESS: 21615 SOLEDAD CYN RD, SAUGUS, CA 91350

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

•			<u>APPROVED</u>	<u>DATE</u>	<u>SIGNATURE</u>
	1.	Animal Care & Control	· 		
	2.	Risk Management			
X	3.	Building & Safety	YES	04/21/16	nlove
X	4.	Fire Department	YES	07/28/16	nlove
X	5.	Public Health	YES	05/27/16	nlove
X	6.	Treasurer & Tax Collector	YES	06/09/16	nlove
X	7.	Business License Commission			
	8.	Sheriff Department			·
X	9.	Regional Planning Commission	YES	04/14/16	nlove
	10.	Weights and Measures			
X	11.	Publishing	YES	08/11/16	tchen
	12.	Public Works - EPD			
X	13.	. Sheriff Fingerprint	YES	05/02/16	nlove
	14.	. Emergency Medical Services			

Conditions:

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

#### BUSINESS LICENSE APPLICATION REFERRAL

ADDRESS OF BUSINESS: 21615 SOLEDAD CYN RD, SAUGUS, CA 91350
TELEPHONE: (661) 254-0540
OWNER OF BUSINESS: CHARLES V KINSTLER II
CAL. DR. LIC.#
NAME OF PERSON FINGERPRINTED:
FICTITIOUS NAME: SANTA CLARITA LANES
MAILING ADDRESS: 21615 SOLEDAD CYN RD, SAUGUS, CA 91350
DATE THAT YOU STARTED BUSINESS:
PREVIOUS OWNER'S NAME, IF KNOWN:
THIS IS AN APPLICATION FOR: NEW LICENSE
BUILDING & SAFETY SANTA CLARITA
APPROVAL DENIAL
RECOMMENDATION: We vrecommend approval at this time.

DATE 04/14/16

**IDENTIFICATION NUMBER 143280** 

BASIC LICENSE NO. 8025

03:39:18 p.m. 06-09-2016

4/32

## COUNTY OF LOS ANGELES TREASURER AND TAX COLLECTOR

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

104

#### BUSINESS LICENSE APPLICATION REFERRAL

KIND OF BUSINESS: BOWLING	ALLEY/SC	
ADDRESS OF BUSINESS: 21615	SOLEDAD CYN RD, SAUG	FUS, CA 91350
TELEPHONE: (661) 254-0540		
OWNER OF BUSINESS: CHARLE	S V KINSTLER II	
CAL. DR. LIC#:		
NAME OF PERSON FINGERPRIN	FED:	
FICTITIOUS NAME: SANTA CLA	RITA LANES	
MAILING ADDRESS: 21615 SOI	ÆDAD CYN RD, SAUGUS,	CA 91350
OATE THAT YOU STARTED BUS	INESS:	
PREVIOUS OWNER'S NAME, IF K	MOWN:	
THIS IS AN APPLICATION FOR:	IEW LICENSE	
•	FIRE DEPARTM	MENT
	LA COUNTY	
□ AP	PROVAL	DENIAL
RECOMMENDATION:		
Military department of the second	Auditudus	
JGNATURE: ES#104 Bay	Tain ahten	DATE: 6/21/16
BASIC LICENSE NO. 8025	DATE 04/14/16	IDENTIFICATION NUMBER 143280

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

#### BUSINESS LICENSE APPLICATION REFERRAL

KIND OF BUSINESS: PUBLIC EAT	ring/sc with Bowling	Ailey isc. Move.
ADDRESS OF BUSINESS: 21615		
TELEPHONE: (661) 254-0540		
OWNER OF BUSINESS: CHARLES	S V KINSTLER II	
CAL. DR. LIC.# :		,
NAME OF PERSON FINGERPRINT	ED:	
FICTITIOUS NAME: SANTA CLAI	RITA LANES	
MAILING ADDRESS: 21615 SOL	EDAD CYN RD, SAUGUS,	CA 91350
DATE THAT YOU STARTED BUSI	NESS:	
PREVIOUS OWNER'S NAME, IF KI	NOWN:	
THIS IS AN APPLICATION FOR:N	EW LICENSE	SANTA CLARTA
	PUBLIC HEAI	L <b>TH</b>
/	LA COUNTY	
□ API	PROVAL	☐ DENIAL
RECOMMENDATION:	40223779/PR	20178930
	00 Recreation	uc
<del></del>		
SIGNATURE:	2	DATE: 5-26-16
BASIC LICENSE NO. 8145	DATE 04/14/16	IDENTIFICATION NUMBER 143280







225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

#### BUSINESS LICENSE APPLICATION REFERRAL

KIND OF BUSINESS: BOW	LING ALLEY/SC	
ADDRESS OF BUSINESS: 2	1615 SOLEDAD CYN RD, SAUGUS	S, CA 91350
TELEPHONE: (661) 254-0540	•	
OWNER OF BUSINESS: CH	ARLES V KINSTLER II	
CAL. DR. LIC# :	,	
NAME OF PERSON FINGER	PRINTED:	
FICTITIOUS NAME: SANTA	A CLARITA LANES	
MAILING ADDRESS: 21615	SOLEDAD CYN RD, SAUGUS, CA	91350
DATE THAT YOU STARTE	D BUSINESS:	•
PREVIOUS OWNER'S NAM	E, IF KNOWN:	
THIS IS AN APPLICATION I		G GOODMAN 661-254-0540
·	TREASURER & TAX (	,
	APPROVAL	☐ DENIAL
RECOMMENDATION:		
SIGNATURE		DATE: 577-16
BASIC LICENSE NO. 8025	DATE <b>04/19/16</b>	IDENTIFICATION NUMBER 143280

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

#### BUSINESS LICENSE APPLICATION REFERRAL

KIND OF BUSINESS: BOWLING ALLEY /SC

ADDRESS OF BUSINESS	: 21615 SOLEDAD CY	(N RD, SAUG	US, CA 91350
TELEPHONE: (661) 254-	0540		
OWNER OF BUSINESS:	CHARLES V KINSTLE	RII	
CAL. DR. LIC.#:			
NAME OF PERSON FING	ERPRINTED:		
FICTITIOUS NAME: SAN	ITA CLARITA LANES		
MAILING ADDRESS: 216	S15 SOLEDAD CYN R	D, SAUGUS, O	CA 91350
DATE THAT YOU STAR	FED BUSINESS:		
PREVIOUS OWNER'S NA	ME, IF KNOWN:		
THIS IS AN APPLICATIO	N FOR: NEW LICENSE	A G	
		NAL PLAN	
	APPROVAL		[] DENIAL
RECOMMENDATION:	Ref. ZF	ADMOS	1-264/ADM09-280
	VV->		04/14/2011
SIGNATURE:	-0 -		DATE: 04/14/2016
BASIC LICENSE NO. 8025	DATE	04/14/16	IDENTIFICATION NUMBER 143280



225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

#### BUSINESS LICENSE APPLICATION REFERRAL

KIND OF BUSINESS: BOWLING ALLEY /SC

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ADDRESS OF BUSINESS: 21615 SOLEDAD CYN RD, SAUGUS, CA 91350
TELEPHONE: (661) 254-0540
OWNER OF BUSINESS: CHARLES V KINSTLER II 7 13 142
CAL. DR. LIC.#:
NAME OF PERSON FINGERPRINTED:
FICTITIOUS NAME: SANTA CLARITA LANES
MAILING ADDRESS: 21615 SOLEDAD CYNRD. SAUGUS, CA-91350
DATE THAT YOU STARTED BUSINESS:
PREVIOUS OWNER'S NAME, IF KNOWN:
THIS IS AN APPLICATION FOR: NEW LICENSE
SHERIFF FINGERPRINT  · LA COUNTY
APPROVAL DENIAL
RECOMMENDATION:
SIGNATURE: UU7 534470 DATE: 512/16
BASIC LICENSE NO. 8025  DATE 04/14/16  JOHN STORMS THE